ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S.Z		06-20-01
O.I.P.E. CLASSIFIER		8	6-29-01
FORMALITY REVIEW	H.T.	117	8/9/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

```
✓ ........................... Rejected          N ........................... Non-elected
  ........................... Allowed           I ........................... Interference
─ (Through numeral)... Canceled               A ........................... Appeal
÷ ........................... Restricted        O ........................... Objected
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Claim Final	Original	Date 5/13/04									
	(1)	✓									
	2	✓									
	3	0									
	4	0									
	5	0									
	6	0									
	7	0									
	8	✓									
	9	✓									
	10	✓									
	11	✓									
	(12)	✓									
	13	✓									
	14	✓									
	15	0									
	16	✓									
	17	✓									
	18	✓									
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	25	✓									
	26	✓									
	27	✓									
	28	✓									
	(29)	✓									
	30	✓									
	31	✓									
	32	✓									
	(33)	✓									
	34	0									
	35	✓									
	36	✓									
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	45										
	46				✓						
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	48			✓							
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Claim Final	Original	Date
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Claim Final	Original	Date
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If more than 150 claims or 10 actions
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